

APPLICATION FOR RENEWAL OF PRENEED BRANCH REGISTRATION

FORM ARBPR (11/2009)

THIS APPLICATION MUST BE RECEIVED BY THE ALABAMA DEPARTMENT OF INSURANCE ON OR BEFORE APRIL 1, ____ OR BE POSTMARKED ON OR BEFORE MARCH 31, ____

MAIL THIS APPLICATION TO:
PRENEED DIVISION
ALABAMA DEPARTMENT OF INSURANCE
201 MONROE STREET, SUITE 502
P. O. BOX 303351
MONTGOMERY, ALABAMA 36130-3351

RENEWAL PERIOD

NAME OF BRANCH PRENEED REGISTRANT

ADDRESS OF BRANCH PRENEED REGISTRANT

TELEPHONE NUMBER OF BRANCH PRENEED REGISTRANT

BRANCH PRENEED CERTIFICATE OF REGISTRANT LICENSE NUMBER

NAME AND CERTIFICATE NUMBER OF COMMON BUSINESS ENTERPRISE WITH WHICH BRANCH IS AFFILIATED

TYPE OF BRANCH REGISTRANT (Funeral Establishment, Cemetery Authority)

The following information must be provided with regard to the annual renewal of the branch preneed registration.

This application for renewal of branch preneed registration must be accompanied by the annual renewal fee as indicated on the attached invoice.

Has there been a change in ownership of the entity holding the branch registration? ____Yes____No
If so, have disclosures been made to the Alabama Department of Insurance? ____Yes____No

Has any information furnished with the previous application for a branch registration changed? If so, please describe such changes on a separate sheet of paper.

Has the applicant been the subject of any bankruptcy proceeding or had a judgment filed against it since the date of the previous application? ____Yes ____No If so, attach a statement of the acts together with the case style and number and name and location of the court(s) in which the proceedings were held or are pending.

For the renewal year, how will the preneed contracts be funded?

(Trust Fund, Life Insurance, Letter of Credit, Surety Bond)

Has there been a change in the funding method since the previous application? ____Yes ____No
If yes, what was the previous funding method? _____

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TRUST FUNDS

If the preneed funds are being placed in trust, who is the trustee(s)? _____

Is this trustee(s) the same trustee(s) as was designated in the previous application? ____ Yes ____ No

If this trustee(s) is different than was designated in the previous application, have new trust documents been filed with the Alabama Department of Insurance? ____ Yes ____ No

LIFE INSURANCE

If the preneed funds are being placed with an insurance company(ies), who is the insurance company(ies)?

Is this insurance company(ies) the same insurance company(ies) as was designated in the previous application?
____ Yes ____ No

LETTER OR CREDIT

If the preneed funds are guaranteed by a letter(s) of credit, who is the issuer of the letter(s) of credit?

Is the issuer of the letter(s) of credit the same issuer as was designated in the previous application? ____ Yes ____ No

If the issuer of the letter(s) of credit is different, has the new letter of credit been filed with the Alabama Department of Insurance? ____ Yes ____ No

SURETY BOND

If the preneed funds are guaranteed by a surety bond(s), who is the issuer of the surety bond?

Is the issuer of the surety bond(s) the same issuer as was designated in the previous application? ____ Yes ____ No

If the issuer of the surety bond(s) is different, has the new surety bond(s) been filed with the Alabama Department of Insurance? ____ Yes ____ No

I certify that the above information is true and correct to the best of my knowledge and belief. I also certify that I have complied with all the requirements of Chapter 27-17A, Code of Alabama 1975.

Signature of Branch Registrant

Date